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MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET					Application Number 10/072,900			Filing Date 12 February, 2002			☐ To be Mailed		
	Substitute	e for Form l	PTO-1360		Applicant(s) ARNOULD-REGUIGNE ET AL.						Page 1 of 1		
					* May be used for additional claims or amendm						ents		
CLAIMS	AS FILED		AFTER FIRST AMENDMENT 12/21/2006		AFTER SEC. AMENDMENT		*			* 12/21/06		*	
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend
1	-	-	1	-	-	-	51		-	-	1	-	-
2							52				1		
3			1				53				1		
4				1			54				1		
5 6				1			55 56				1 1		
7			1				57				1		
8			1				58				1		
9				2			59				1		
10							60				1		
11							61				1		
12				1			62				1		
13 14				1			63 64				1		
15							65						
16				2			66						
17				2			67						
18				1			68						
19				1			69						
20				1			70						
21				1			71						
22 23			1	1			72 73						
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39 40							90						
41				1			91						
42				1			92						
43				1			93						
44							94						
45							95						
46				-			96						
47 48				1			97 98						
48							98						
50							100						
Total							Total			5			
Indep							Indep						
Total							Total				36		
Depend Total				<u> </u>			Depend Total				<u> </u> 41		
Claims							Claims			_			

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